

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875

Application or Document Number

10/785,259

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		

* If the difference in column 1 is less than zero, enter "0" in column 2.

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

RATE	FEE
	\$
X \$	=
X \$	=
+ \$	=
TOTAL	

OR

OR

OR

OR

OR

OR

RATE	FEE
	\$
X \$	=
X \$	=
+ \$	=
TOTAL	

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

AMENDMENT	REMAINING AFTER AMENDMENT	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))	3	Minus	20
Independent (37 CFR 1.16(b))	1	Minus	3
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

RATE	ADDITIONAL FEE
X \$	=
X \$	=
+ \$	=
TOTAL ADD'L FEE	

OR

OR

OR

OR

OR

OR

RATE	ADDITIONAL FEE
X \$	=
X \$	=
+ \$	=
TOTAL ADD'L FEE	

(Column 1)

(Column 2)

(Column 3)

AMENDMENT B	REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))		Minus	
Independent (37 CFR 1.16(b))		Minus	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDITIONAL FEE
X \$	=
X \$	=
+ \$	=
TOTAL ADD'L FEE	

OR

OR

OR

OR

OR

OR

OR

RATE	ADDITIONAL FEE
X \$	=
X \$	=
+ \$	=
TOTAL ADD'L FEE	

(Column 1)

(Column 2)

(Column 3)

AMENDMENT C	REMAINING AFTER AMENDMENT	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))		Minus	
Independent (37 CFR 1.16(b))		Minus	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDITIONAL FEE
X \$	=
X \$	=
+ \$	=
TOTAL ADD'L FEE	

OR

OR

OR

OR

OR

OR

OR

RATE	ADDITIONAL FEE
X \$	=
X \$	=
+ \$	=
TOTAL ADD'L FEE	

* If the difference in column 1 is less than the entry in column 2, enter "0" in column 3.
** If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter 20.
*** If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter 3.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, on the amount of time you require to complete this form and/or suggestions for reducing this burden.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form call 1-800-PTO-9199 and select option 2.